Filed 06/20/16 Entered 06/20/16 12:43:08

	Document Page 1 of 46		
Fill	in this information to identify your case:		
Deb	tor 1 John Allen Toms		
	First Name Middle Name Last Name		
1	tor 2 Paige Bryant Toms Juse if, filing) First Name Middle Name Last Name		
Linit	ed States Bankruptcy Court for the: WESTERN DISTRICT OF VIRGINIA		
Office	ed States Ballkruptcy Court for the. WESTERN DISTRICT OF VIROUNIA		
Cas (if kn	e number 16-61148	Chos	de if this is an
(11 K11			ck if this is an nded filing
			J
Of	ficial Form 106Sum		
	ficial Form 106Sum mmary of Your Assets and Liabilities and Certain Statistical Information		40/45
	s complete and accurate as possible. If two married people are filing together, both are equally responsible f	or supplyi	12/15
info	mation. Fill out all of your schedules first; then complete the information on this form. If you are filing amend		
your	original forms, you must fill out a new Summary and check the box at the top of this page.		
Par	1: Summarize Your Assets		
			assets
		Value	of what you own
1.	Schedule A/B: Property (Official Form 106A/B)	\$	312,900.00
	1a. Copy line 55, Total real estate, from Schedule A/B	Φ	312,300.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	25,354.25
	1c. Copy line 63, Total of all property on Schedule A/B	\$	338,254.25
Dor			
Par	2: Summarize Your Liabilities		
			iabilities nt you owe
_		Allioui	n you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	278,933.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)		
Э.	3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	1,804.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	166,640.30
	,,		100,040.00
	Your total liabilities	\$	447,377.30
	. our total habilities		777,077.00
Par	3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I)	•	4 400 26
	Copy your combined monthly income from line 12 of Schedule I	\$	4,488.36
5.	Schedule J: Your Expenses (Official Form 106J)		

4,352.00 Copy your monthly expenses from line 22c of Schedule J.....

Part 4: Answer These Questions for Administrative and Statistical Records

- Are you filing for bankruptcy under Chapters 7, 11, or 13?
 - □ No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.
 - Yes
- What kind of debt do you have?
 - Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
 - Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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	Paige Bryant Toms	Case number (if known)	16-61148	
3. Fron	n the Statement of Your Current Monthly Income: Copy	your total current monthly income from O	fficial Form	

8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

From Part 4 on Schedule E/F, copy the following:	Tot	al claim
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	1,804.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	1,804.00

Debtor 1

John Allen Toms

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Fill	in this informa	ation to identify	your case and th	is filing	j:					
Deb	otor 1	John Allen	Toms							
		First Name	Middle	Name	Last Na	me				
	otor 2 use, if filing)	Paige Bryan		Name	Last Na	me				
` .	. 0,									
Unit	ed States Bani	kruptcy Court for	the: WESTERN	אופוטו	ICT OF VIRGINIA					
Cas	e number 16	6-61148								Check if this is an amended filing
∩fí	ficial For	m 106A/E	2							
-		A/B: P	_							12/15
hink infor	it fits best. Be mation. If more wer every questi	as complete and space is needed, on.	accurate as possible attach a separate sh	e. If two neet to t	only once. If an asset married people are filli his form. On the top of Estate You Own or Ha	ng together, both are e any additional pages,	equally respo	nsible for sup	pplyin	g correct
	No. Go to Part 2									
1.1	0.500 D. I. I.			What	is the property? Check	all that apply				
	3568 Pritch	ett Lane available, or other des	scription		Single-family home					exemptions. Put s on Schedule D:
	ou oot aaarooo, ii		on puon		Duplex or multi-unit bu Condominium or coope	-				ured by Property.
					Manufactured or mobil	e home	Current valu	ie of the	Curr	ent value of the
	Charlottesv	ville VA	22911-0000		Land		entire prope	erty?		ion you own?
	City	State	ZIP Code		Investment property Timeshare		\$312	2,900.00	_	\$312,900.00
					Other					nership interest y the entireties, or
				Who	has an interest in the p	property? Check one	a life estate), if known.	-	, ,
	A lle e se e se e				•		Tenancy	by the Ent	irety	
	Albemarle				,					
	County				Debtor 1 and Debtor 2 At least one of the deb	•	☐ Check	if this is com	munity	y property
				Othe	r information you wish erty identification numl	to add about this item	(,		
					Map ID: 03200000 Value: \$312,900.0					
2.	Add the dollar pages you ha	r value of the pove attached for	ortion you own fo Part 1. Write that	r all of numbe	your entries from Pa	rt 1, including any	entries for =	:>		\$312,900.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

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Debt Debt			Case number (if known) 16-	61148
3. Ca	ars, vans, trucks, tractors, sport ut	tility vehicles, motorcycles		
	No			
	Yes			
_	res			
3.1	Make: Ford	Who has an interest in the property? Cheek are	Do not deduct secured of	claims or exemptions. Put
3.1	FOFO	Who has an interest in the property? Check one	the amount of any secur	red claims on Schedule D: nims Secured by Property.
	Model: F-350 Year: 2004	Debtor 1 only		
		□ Debtor 2 only 000 □ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	Other information:	At least one of the debtors and another	cilino property :	po
	KBB Value: \$3,422.00			
		Check if this is community property (see instructions)	\$3,422.00	\$3,422.00
3.2	Make: Saturn	Who has an interest in the property? Check one		claims or exemptions. Put
	Model: S1 Sedan	■ Debtor 1 only		ed claims on Schedule D: nims Secured by Property.
	Year: 2000	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 175,	,000 Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	KBB Value: \$794.00	Check if this is community property (see instructions)	\$794.00	\$794.00
3.3	Make: Chevrolet	Who has an interest in the property? Check one		claims or exemptions. Put red claims on Schedule D:
	Model: Suburban	Debtor 1 only		nims Secured by Property.
	Year: 1998	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 277,	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	KBB Value: \$921.00	Check if this is community property (see instructions)	\$921.00	\$921.00
3.4	Make: Ford	Who has an interest in the property? Check one		claims or exemptions. Put
	Model: Bronco	Debtor 1 only		nims Secured by Property.
	Year: 1979	Debtor 2 only	Current value of the	Current value of the
	Approximate mileage: 250,	Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	Client Estimated Value: \$250 NOTE: Vehicle not operating,used for scrap par	☐ Check if this is community property	\$250.00	\$250.00
Exa	Client Estimated Value: \$250 NOTE: Vehicle not operating,used for scrap par attercraft, aircraft, motor homes, A	At least one of the debtors and another Check if this is community property	s, and accessories	<u>\$250</u>
11	Make: Adam	Who has an interest in the property? Objectives		
4.1	Make: Adam Model: Utility Trailer	Who has an interest in the property? Check one Debtor 1 only	the amount of any secur	claims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
	Year: 2000	Debtor 2 only	Current value of the	Current value of the
		Debtor 1 and Debtor 2 only	entire property?	portion you own?
	Other information:	At least one of the debtors and another		
	Client Estimated Value: \$250	0.00 Check if this is community property (see instructions)	\$250.00	\$250.00

Official Form 106A/B Schedule A/B: Property page 2

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ebtor 1 John Allen Paige Brya	Toms nt Toms	Ca	ase number (if known) 16-	61148
1.2 Make: Astro	oat 17SC &	Who has an interest in the property? Check one		claims or exemptions. Put ed claims on Schedule D:
Model: Trailer	at 1700 a	Debtor 1 only		ims Secured by Property.
Year: 1991		Debtor 2 only	Current value of the	Current value of the
		Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other information:		☐ At least one of the debtors and another		
Client Estimated	I Value: \$500.00	Check if this is community property (see instructions)	\$500.00	\$500.00
I.3 Make: Colema	n	Who has an interest in the property? Check one	Do not deduct secured c	claims or exemptions. Put
Model: Crawda	d Roat	Debtor 1 only		ed claims on Schedule D: nims Secured by Property.
Year: 1992		′		
199 <u>2</u>		Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
Other information:		Debtor 1 and Debtor 2 only	entire property?	portion you own?
Other information:		At least one of the debtors and another	¢250.00	¢250.00
Client Estimated	l Value: \$250.00	☐ Check if this is community property (see instructions)	\$250.00	\$250.00
you own or nave any	iegai oi equitable III	terest in any of the following items?		Current value of the portion you own?
Examples: Major applia		s, china, kitchenware		Do not deduct secured claims or exemptions.
Examples: Major applia ☐ No	2 Sofas, 2 Dinin Dishwasher, 1 I Rocking Chairs Tables, 4 End T Dressers, 2 Wa	ng Tables with 6 Chairs, 1 Stove, 2 Refriger Microwave, 1 Washer, 1 Dryer, 3 Recliners, 1, 4 Office Chairs, 3 Desks, 5 Bookshelves, 1 ables, 2 Other Tables, 1 Bed, 2 Nighhtstan 1 drobes, 12 Bookshelves, 1 Woodstove, La 2 Window Unit Air Conditioners, Lawn Too	ators, 1 2 2 Coffee ds, 4 wn	
_ ' ' ' '	2 Sofas, 2 Dinin Dishwasher, 1 I Rocking Chairs Tables, 4 End T Dressers, 2 Wal Furniture, Grill,	ng Tables with 6 Chairs, 1 Stove, 2 Refriger Microwave, 1 Washer, 1 Dryer, 3 Recliners, 4, 4 Office Chairs, 3 Desks, 5 Bookshelves, Tables, 2 Other Tables, 1 Bed, 2 Nighhtstan rdrobes, 12 Bookshelves, 1 Woodstove, La	ators, 1 2 2 Coffee ds, 4 wn	claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 3

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Debtor 1 Debtor 2			Case number (if known)	16-61148
Exan	musical instr	graphic, exercise, and other hobby equipment; bicycles, pool tabl	es, golf clubs, skis; canoes	and kayaks; carpentry tools;
		Fishing Poles, Tackle and Tackle Box, Coolers, Hunt Pocket Knives, Hunting Gear	ing Knives,	\$300.00
□ No	mples: Pistols, rifle	s, shotguns, ammunition, and related equipment		
		Glock 23 Pistol, Glock 19 Pistol, Remmington 700 Rid Judge Revolver, Baretta 92 FS Pistol, Henry Frontier Pistol, Ruger M77 Rifle, Gun Safe, Gun Cabinet, Amn Cross Bow	Rifle, Ruger	\$500.00
☐ No	mples: Everyday cl	othes, furs, leather coats, designer wear, shoes, accessories		
		Clothing		\$1,000.00
□ No	<i>mples:</i> Everyday je	welry, costume jewelry, engagement rings, wedding rings, heirloo 2 Wedding Rings	m jewelry, watches, gems, ç	gold, silver
		25 Rings, 1 Watch, 16 Pairs of Earrings, 8 Necklaces, 5 Pins, Homemade Jewelry, Miscellaneous Costume Watch		\$500.00
Exa □ No	-farm animals mples: Dogs, cats, oes. Describe	birds, horses		
		4 Pets		\$40.00
■ No		d household items you did not already list, including any hea	ılth aids you did not list	
		of all of your entries from Part 3, including any entries for pagnumber here	ges you have attached	\$5,415.00
	Describe Your Finar			Current value of the
Do you	own or nave any	egal or equitable interest in any of the following?		portion you own? Do not deduct secured claims or exemptions.

Case 16-61148 Doc 13 Filed 06/20/16 Entered 06/20/16 12:43:08 Desc Main Document Page 7 of 46 Debtor 1 John Allen Toms 16-61148 Debtor 2 **Paige Bryant Toms** Case number (if known) 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ☐ No ■ Yes..... \$10.00 Cash 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: ■ Yes..... \$12.16 Wells Fargo Checking 17.2. Savings Wells Fargo \$1.09 **UVA Credit Union** Checking NOTE: Account has a zero balance. \$0.00 17.3. Savings **UVA Credit Union** \$5.00 17.4. 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No Institution or issuer name: ☐ Yes..... 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture □ No ■ Yes. Give specific information about them..... Name of entity: % of ownership: 100 Shares in Old Dominion National Bank at \$40.00 \$0.40 per share % John Toms, Sole Proprietor 100 % \$1.00 Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them Issuer name: 21. Retirement or pension accounts

20. Government and corporate bonds and other negotiable and non-negotiable instruments

No

Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

☐ Yes. List each account separately.

Type of account:

Institution name:

22. Security deposits and prepayments

Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Case 16-61148 Doc 13

Debtor 1 Debtor 2			C	Case number (if known)	16-61148
☐ Ye	S		Institution name or individual:		
■ No	•		yment of money to you, either for life or for a number of	years)	
	S	Issuer name and	·		
	S.C. §§ 530(b)(ation IRA, in an a 1), 529A(b), and 52	ccount in a qualified ABLE program, or under a qual 29(b)(1).	lified state tuition pro	gram.
☐ Yes	S	Institution name a	and description. Separately file the records of any interest	sts.11 U.S.C. § 521(c):	
■ No	•	future interests i	in property (other than anything listed in line 1), and	rights or powers exe	rcisable for your benefit
	·		de secrets, and other intellectual property		
<i>Exar</i> ■ No	mples: Internet of	domain names, we	bsites, proceeds from royalties and licensing agreement	ts	
☐ Yes	s. Give specific	information about	them		
	mples: Building	es, and other gene permits, exclusive	eral intangibles licenses, cooperative association holdings, liquor licens	es, professional license	es
		information about	them		
☐ Ye					Current value of the
	or property owe	ed to you?			portion you own? Do not deduct secured claims or exemptions.
Money o	refunds owed t	o you	them, including whether you already filed the returns and	d the tax years	<pre>portion you own? Do not deduct secured</pre>
Money o	refunds owed t	o you	them, including whether you already filed the returns and Any interest the Debtor has in any and all federal refunds in up to the date of filing.	d the tax years	<pre>portion you own? Do not deduct secured</pre>
Money o	refunds owed t	o you	Any interest the Debtor has in any and all federal refunds in up to the date of		portion you own? Do not deduct secured claims or exemptions.
28. Tax r No Yes	refunds owed to s. Give specific sily support mples: Past due	o you information about	Any interest the Debtor has in any and all federal refunds in up to the date of filing. Any interest the Debtor has in any and all state tax refunds in up to the date of	Federal State	portion you own? Do not deduct secured claims or exemptions. \$1.00
28. Tax r \(\text{No} \) No \(\text{Pressure} \) Yes	ily support mples: Past due s. Give specific r amounts som mples: Unpaid w benefits;	o you information about or lump sum alimo information	Any interest the Debtor has in any and all federal refunds in up to the date of filing. Any interest the Debtor has in any and all state tax refunds in up to the date of filing.	Federal State ce settlement, property	\$1.00 settlement
28. Tax r No Yes 29. Fami Exar No Yes 30. Othe Exar	ily support mples: Past due s. Give specific	o you information about a continuous or lump sum alimoninformation neone owes you a continuous you ages, disability insunpaid loans you	Any interest the Debtor has in any and all federal refunds in up to the date of filing. Any interest the Debtor has in any and all state tax refunds in up to the date of filing. ony, spousal support, child support, maintenance, divorce surance payments, disability benefits, sick pay, vacation	Federal State ce settlement, property	\$1.00 settlement
28. Tax r No Yes 29. Fami Exar No Yes 30. Othe Exar	ily support mples: Past due s. Give specific r amounts som mples: Unpaid w benefits;	o you information about a continuous or lump sum alimoninformation neone owes you a continuous you ages, disability insunpaid loans you	Any interest the Debtor has in any and all federal refunds in up to the date of filing. Any interest the Debtor has in any and all state tax refunds in up to the date of filing. ony, spousal support, child support, maintenance, divorce surance payments, disability benefits, sick pay, vacation	Federal State ce settlement, property pay, workers' comper	\$1.00 settlement

□ No

page 6

Page 9 of 46 Document Debtor 1 **John Allen Toms** 16-61148 Debtor 2 Case number (if known) **Paige Bryant Toms** Yes. Name the insurance company of each policy and list its value. Beneficiary: Company name: Surrender or refund value: Woodmen of the World Life Insurance \$253.96 **Company Flexible Life Insurance Policy** Woodmen of the World Life Insurance \$7,651.04 **Company Flexible Life Insurance Policy** 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$7.977.25 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? ☐ No. Go to Part 6. Yes. Go to line 38. Current value of the portion you own? Do not deduct secured claims or exemptions. 38. Accounts receivable or commissions you already earned ■ No ☐ Yes. Describe..... 39. Office equipment, furnishings, and supplies Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices ■ No ☐ Yes. Describe..... 40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade □ No Yes. Describe.....

Case 16-61148

Doc 13

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Desc Main

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Debtor 2	Paige Bryant Toms	Case number (if known)	16-61148
	2000 John Deere 4100 Compact Tractor, 2000 John De Mower Attachment, John Deere Loader Attachment, J Post Hole Digger Attachment, 2002 Polaris 4 Wheeler Blade Attachment, Snap-On Tool Box and Side Cabine	ohn Deere with Snow	
	Tool Box, Hand Tools, Air Tools, Air Compressor, External Compressor, Ex	ension	

Cords, Air Hose, 2 Floor Jacks, Jack Stands, Otto-Test Scanner, Vantage Tester, Kerosene Heater, 2 Computers with Monitors and Printers, Auto Fluids, Storage cabinets, Storage Shelves, Drain Pans, 2 Floor Safes, Generator, Fuel Cans, Extension Ladder, 2

\$5,575.00

11. Inventory	
■ No	
☐ Yes. Describe	
42. Interests in partnerships or joint ventures	
■ No	
☐ Yes. Give specific information about them	
Name of entity: % of ownership:	
43. Customer lists, mailing lists, or other compilations	
■ No.	
☐ Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
_ = -,	
■ No	
☐ Yes. Describe	
14. Any business-related property you did not already list	
■ No	
☐ Yes. Give specific information	
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached	\$5,575.00
for Part 5. Write that number here	Ψο,στοισσ
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In.	
If you own or have an interest in farmland, list it in Part 1.	
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
No. Go to Part 7.	
☐ Yes. Go to line 47.	
Tes. Go to line 47.	
Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already list?	
Examples: Season tickets, country club membership No	
■ NO □ Yes. Give specific information	
Tes. Give specific information	
54. Add the dollar value of all of your entries from Part 7. Write that number here	\$0.00
•	

Official Form 106A/B Schedule A/B: Property page 8

John Allen Toms

Step Ladders

Debtor 1

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Deb Deb	otor 1 John Allen Toms Paige Bryant Toms			Case number (if known)	16-61148	
Part	8: List the Totals of Each Part of this Form					
55.	Part 1: Total real estate, line 2					\$312,900.00
56.	Part 2: Total vehicles, line 5		\$6,387.00			
57.	Part 3: Total personal and household items, line 15		\$5,415.00			
58.	Part 4: Total financial assets, line 36		\$7,977.25			
59.	Part 5: Total business-related property, line 45		\$5,575.00			
60.	Part 6: Total farm- and fishing-related property, line 52		\$0.00			
61.	Part 7: Total other property not listed, line 54	+	\$0.00			
62.	Total personal property. Add lines 56 through 61	_	\$25,354.25	Copy personal property to	otal	\$25,354.25
63.	Total of all property on Schedule A/B. Add line 55 + line 62				\$	338,254.25

Official Form 106A/B Schedule A/B: Property page 9

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Fill in this info					
Debtor 1	John Allen Toms				
	First Name	Middle Name	Last Name		
Debtor 2	Paige Bryant Ton	ns			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	WESTERN DISTRICT O	OF VIRGINIA		
Case number	16-61148				
(if known)					☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1: Identify the Property You Claim as Exempt

1.	Which set of exemptions are	you claiming?	Check one only	, even if	your spouse is filin	g with	you
----	-----------------------------	---------------	----------------	-----------	----------------------	--------	-----

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	ck only one box for each exemption.	
2004 Ford F-350 114,000 miles KBB Value: \$3,422.00	\$3,422.00		\$3,422.00	Va. Code Ann. § 34-26(8)
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2000 Saturn S1 Sedan 175,000 miles KBB Value: \$794.00	\$794.00		\$794.00	Va. Code Ann. § 34-26(8)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
1998 Chevrolet Suburban 277,000 miles	\$921.00		\$921.00	Va. Code Ann. § 34-26(8)
KBB Value: \$921.00 Line from <i>Schedule A/B</i> : 3.3			100% of fair market value, up to any applicable statutory limit	
1979 Ford Bronco 250,000 miles Client Estimated Value: \$250.00	\$250.00		\$250.00	Va. Code Ann. § 34-4
NOTE: Vehicle not operating, used for scrap parts. Line from Schedule A/B: 3.4			100% of fair market value, up to any applicable statutory limit	
2000 Adam Utility Trailer	\$250.00		\$250.00	Va. Code Ann. § 34-4
Client Estimated Value: \$250.00 Line from Schedule A/B: 4.1			100% of fair market value, up to any applicable statutory limit	

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btor 1 btor 2	John Allen Toms Paige Bryant Toms			Case number (if known)	16-61148
	description of the property and line on dule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim eck only one box for each exemption.	Specific laws that allow exemption
	Astro Bass Boat 17SC & Trailer nt Estimated Value: \$500.00	\$500.00	•	\$500.00	Va. Code Ann. § 34-4
Line	from Schedule A/B: 4.2			100% of fair market value, up to any applicable statutory limit	
Clie	2 Coleman Crawdad Boat nt Estimated Value: \$250.00	\$250.00	•	\$250.00	Va. Code Ann. § 34-4
Line	from Schedule A/B: 4.3			100% of fair market value, up to any applicable statutory limit	
Chai	fas, 2 Dining Tables with 6 irs, 1 Stove, 2 Refrigerators, 1	\$1,875.00		\$1,875.00	Va. Code Ann. § 34-26(4a)
1 Dr Chai Boo Tabl Nigh	washer, 1 Microwave, 1 Washer, yer, 3 Recliners, 2 Rocking irs, 4 Office Chairs, 3 Desks, 5 kshelves, 2 Coffee Tables, 4 End es, 2 Other Tables, 1 Bed, 2 httstands, 4 from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	fa, 2 Armchairs, Sewing hine, Flour Bin	\$500.00		\$500.00	Va. Code Ann. § 34-26(4a)
NOT are a	E: These household furnishings antiques from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	
	levisions, 1 Computer, 2 iPads, 1 eo, 1 Speaker Set, 2 Laptops, 1	\$500.00		\$500.00	Va. Code Ann. § 34-4
Prin	ter, 2 iPods, 1 DVD Player from Schedule A/B: 7.1			100% of fair market value, up to any applicable statutory limit	
	ing Poles, Tackle and Tackle , Coolers, Hunting Knives,	\$300.00		\$300.00	Va. Code Ann. § 34-4
	ket Knives, Hunting Gear from Schedule A/B: 9.1			100% of fair market value, up to any applicable statutory limit	
	k 23 Pistol, Glock 19 Pistol, mington 700 Rifle, Taurs Judge	\$500.00		\$500.00	Va. Code Ann. § 34-26(4b)
Fron M77 Amn	olver, Baretta 92 FS Pistol, Henry htier Rifle, Ruger Pistol, Ruger Rifle, Gun Safe, Gun Cabinet, nunition, Cross Bow from Schedule A/B: 10.1			100% of fair market value, up to any applicable statutory limit	
Clot Line	hing from Schedule A/B: 11.1	\$1,000.00		\$1,000.00	Va. Code Ann. § 34-26(4)
				100% of fair market value, up to any applicable statutory limit	
	edding Rings from Schedule A/B: 12.1	\$200.00		\$200.00	Va. Code Ann. § 34-26(1a)
				100% of fair market value, up to any applicable statutory limit	

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John Allen Toms Debtor 1 16-61148 Debtor 2 **Paige Bryant Toms** Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 25 Rings, 1 Watch, 16 Pairs of Va. Code Ann. § 34-4 \$500.00 \$500.00 Earrings, 8 Necklaces, 11 Bracelets, 5 Pins. Homemade Jewelry. 100% of fair market value, up to Miscellaneous Costume Jewelry, 1 any applicable statutory limit Watch Line from Schedule A/B: 12.2 4 Pets Va. Code Ann. § 34-26(5) \$40.00 \$40.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Cash Va. Code Ann. § 34-4 \$10.00 \$10.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: Wells Fargo Va. Code Ann. § 34-4 \$12.16 \$12.16 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Savings: Wells Fargo Va. Code Ann. § 34-4 \$1.09 \$1.09 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit Savings: UVA Credit Union Va. Code Ann. § 34-4 \$5.00 Line from Schedule A/B: 17.4 100% of fair market value, up to any applicable statutory limit 100 Shares in Old Dominion National Va. Code Ann. § 34-4 \$40.00 \$40.00 Bank at \$0.40 per share Line from Schedule A/B: 19.1 100% of fair market value, up to any applicable statutory limit John Toms, Sole Proprietor Va. Code Ann. § 34-4 \$1.00 100 % ownership Line from Schedule A/B: 19.2 100% of fair market value, up to any applicable statutory limit Federal: Any interest the Debtor has Va. Code Ann. § 34-4 \$1.00 \$1.00 in any and all federal refunds in up to the date of filing. 100% of fair market value, up to Line from Schedule A/B: 28.1 any applicable statutory limit State: Any interest the Debtor has in Va. Code Ann. § 34-4 \$1.00 \$1.00 any and all state tax refunds in up to the date of filing. 100% of fair market value, up to any applicable statutory limit Line from Schedule A/B: 28.2 Potential funds due to debtor Va. Code Ann. § 34-4 \$1.00 \$1.00 unknown at the time of filing, including possible garnishment 100% of fair market value, up to funds, and inheritance. any applicable statutory limit Line from Schedule A/B: 30.1

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Debte Debte				Case number (if known)	16-61148
Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
-	Woodmen of the World Life Insurance Company Flexible Life	\$253.96		\$253.96	Va. Code Ann. § 34-4
I	Insurance Policy Line from Schedule A/B: 31.1			100% of fair market value, up to any applicable statutory limit	
-	Woodmen of the World Life	\$7,651.04		\$5,000.00	Va. Code Ann. § 34-4
I	Insurance Company Flexible Life Insurance Policy Line from Schedule A/B: 31.2			100% of fair market value, up to any applicable statutory limit	
	2000 John Deere 4100 Compact Tractor, 2000 John Deere Belly	\$5,575.00		\$5,575.00	Va. Code Ann. § 34-26(7)
	Mower Attachment, John Deere Loader Attachment, John Deere Post Hole Digger Attachment, 2002 Polaris 4 Wheeler with Snow Blade Attachment, Snap-On Tool Box and Side Cabinet, Craftsman Tool Box, Ha Line from Schedule A/B: 40.1			100% of fair market value, up to any applicable statutory limit	
(I	Are you claiming a homestead exemption of (Subject to adjustment on 4/01/19 and every 3 No Yes. Did you acquire the property covered No Yes	years after that for ca	ises fi	,	,

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Fill in this information to identify you	ur case:			
Debtor 1 John Allen Tom	ns			
First Name	Middle Name Last Name		-	
Debtor 2 Paige Bryant To				
(Spouse if, filing) First Name	Middle Name Last Name			
United States Bankruptcy Court for the	: WESTERN DISTRICT OF VIRGINIA		-	
Case number 16-61148				
(if known)			☐ Check	if this is an
			amend	led filing
Official Form 106D				
Schedule D: Creditors	Who Have Claims Secured	by Propert	V	12/15
)	
is needed, copy the Additional Page, fill it	If two married people are filing together, both are equout, number the entries, and attach it to this form. On			
number (if known).				
1. Do any creditors have claims secured b				
	his form to the court with your other schedules. Yo	u have nothing else t	to report on this form.	
Yes. Fill in all of the information	below.			
Part 1: List All Secured Claims				
2. List all secured claims. If a creditor has	more than one secured claim, list the creditor separately	Column A	Column B	Column C
for each claim. If more than one creditor has	s a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
much as possible, list the claims in alphabeti	ical order according to the creditor's name.	Do not deduct the value of collateral.	that supports this claim	portion If any
2.1 Caliber Home Loans, Inc.	Describe the property that secures the claim:	\$268,425.00	\$312,900.00	\$0.00
Creditor's Name	3568 Pritchett Lane Charlottesville,	<u> </u>		
	VA 22911 Albemarle County			
	Tax Map ID: 03200000029B1			
Attn: Cash Operations	CTA Value: \$312,900.00			
PO Box 24330	As of the date you file, the claim is: Check all that apply.			
Oklahoma City, OK 73124	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secucar loan)	ıred		
Debtor 2 only	_			
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset) Mortgage			
community doze				
Date debt was incurred 5/2005	Last 4 digits of account number 1539			
2.2 Uva Credit Union-a D	Describe the property that secures the claim:	\$10,508.00	\$0.00	\$10,508.00
Creditor's Name	Judgment	Ψ10,000.00		<u> </u>
	in Charlottesville General			
	District Court Case No.			
	GV13001281-00, recorded			
	7/17/2013 in Albemarle County As of the date you file, the claim is: Check all that			
3300 Berkmar Dr	apply.			
Charlottesville, VA 22901	☐ Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
	Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only	☐ An agreement you made (such as mortgage or secucar loan)	ıred		
Debtor 2 only				
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			

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Debtor 1	John Aller	n Toms			Case number (if know)	16-61148	
	First Name	Middle Na	ame Last Name				
Debtor 2	Paige Brya	ant Toms					
	First Name	Middle Na	ame Last Name				
	if this claim re nunity debt	lates to a	☐ Other (including a right to offset)			
Date debt	was incurred	Opened 12/01/88 Last Active 3/04/15	Last 4 digits of account no	umber 2608			
If this is Write th	Add the dollar value of your entries in Column A on this page. Write that number here: \$278,933.00 If this is the last page of your form, add the dollar value totals from all pages. Write that number here: \$278,933.00 \$278,933.00						
trying to than one	collect from you	u for a debt you o	we to someone else, list the credit you listed in Part 1, list the addition	or in Part 1, and t	then list the collection age	For example, if a collection agency is ency here. Similarly, if you have more tional persons to be notified for any	
Br 13	ock and Sc 15 Westbro	reet, City, State & 2 ott, PLLC ok Plaza Drive m, NC 27103			ich line in Part 1 did you ent		

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Fill i	n this informa	ntion to identify your ca	se:					
Debt	or 1	John Allen Toms						
		First Name	Middle Name	Last Nam	е			
Debt	or 2	Paige Bryant Toms						
(Spou	se if, filing)	First Name	Middle Name	Last Nam	е			
Unite	ed States Bank	ruptcy Court for the:	WESTERN DISTRICT O	F VIRGINIA				
Case	e number 16	i-61148						
(if kno		-01140					☐ Check	if this is an
							_	ded filing
~ ···		4005/5						
	cial Form							
<u>Scr</u>	<u>nedule E/l</u>	F: Creditors Wh	o Have Unsecu	red Claim	S			12/15
Sched eft. A	lule D: Creditor	s Who Have Claims Secure nuation Page to this page.	d Leases (Official Form 10 ed by Property. If more spa If you have no information	ice is needed, co	py the Part	you need, fill it out,	number the entries i	n the boxes on the
Part	1: List All	of Your PRIORITY Unse	ecured Claims					
1. [Oo any creditors	s have priority unsecured o	claims against you?					
	☐ No. Go to Par	t 2.						
ı	Yes.							
io p	dentify what type possible, list the o	of claim it is. If a claim has lactaims in alphabetical order a	f a creditor has more than or both priority and nonpriority a according to the creditor's na cular claim, list the other cred	mounts, list that me. If you have n	claim here a	nd show both priority a	nd nonpriority amoun	ts. As much as
		·	the instructions for this form		booklet.)			
`		, , , , , , , , , , , , , , , , , , ,			,	Total claim	Priority amount	Nonpriority amount
2.1		of Albemarle	Last 4 digits of a	account number	1539	\$843.00	\$843.00	\$0.00
	Priority Cred	itor's Name ent Of Finance	When was the d	ebt incurred?	2015 - 2	2016		
	401 McIn						•	
		sville, VA 22902-457						
		et City State Zlp Code	As of the date ye	ou file, the claim	is: Check a	all that apply		
		he debt? Check one.	☐ Contingent					
	☐ Debtor 1 onl		☐ Unliquidated					
	☐ Debtor 2 onl	у	☐ Disputed					
	■ Debtor 1 and	d Debtor 2 only	Type of PRIORIT	TY unsecured cla	aim:			
	☐ At least one	of the debtors and another	☐ Domestic sup	port obligations				
	☐ Check if this	s claim is for a community	debt Taxes and ce	rtain other debts	ou owe the	government		
	Is the claim su	bject to offset?				ou were intoxicated		
	■ No		Other. Specify					
	☐ Yes			Personal F	Property	Taxes		

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Debtor Debtor	1 John Allen Toms 2 Paige Bryant Toms		Case nur	mber (if know)	16-61148	
2.2	Internal Revenue Service	Last 4 digits of account number	1539	\$960.00	\$960.00	\$0.00
	Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	2015		_	
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all th	nat apply		
W	/ho incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	. ■ Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	nim:			
	At least one of the debtors and another	☐ Domestic support obligations				
	Check if this claim is for a community debt	■ Taxes and certain other debts y	ou owe the gov	vernment		
Is	the claim subject to offset?	☐ Claims for death or personal inj	_			
	No	Other. Specify				
] Yes	2015 Tax F	Returns			
2.3	Virginia Department of Taxation	Last 4 digits of account number	1539	\$1.00	\$1.00	\$0.00
	Priority Creditor's Name Bankruptcy Unit PO Box 2156	When was the debt incurred?			-	
	Richmond, VA 23218-2156 Number Street City State Zlp Code	As of the date you file, the claim	is: Check all th	nat apply		
W	/ho incurred the debt? Check one.	☐ Contingent				
	Debtor 1 only	☐ Unliquidated				
	Debtor 2 only	Disputed				
	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cla	nim:			
	At least one of the debtors and another	☐ Domestic support obligations				
	Check if this claim is for a community debt to the claim subject to offset?	■ Taxes and certain other debts y □ Claims for death or personal inj	J			
_	No	Other. Specify				
L	Yes	Income Ta	xes NOTIC	E ONLY		
Part 2	List All of Your NONPRIORITY Unsecu	red Claims				
3. Do	any creditors have nonpriority unsecured claim	s against you?				
	No. You have nothing to report in this part. Submit	this form to the court with your other s	schedules.			
-	Yes.	•				
uns	at all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each control one creditor holds a particular claim, list the other	laim. For each claim listed, identify wh	nat type of claim	n it is. Do not list cla	aims already included in Par	t 1. If more

Total claim

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Debto			0	21110
Debto	Paige Bryant Toms		Case number (if know) 16-0	61148
4.1	American Express Bank, FSB	Last 4 digits of account number	1539	\$851.81
	Nonpriority Creditor's Name c/o Becket and Lee LLP PO Box 3001	When was the debt incurred?	4/2012	
	Malvern, PA 19355			
	Number Street City State Zlp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you	u did not
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Open acco	unt	
4.2	American Express Bank, FSB Nonpriority Creditor's Name	Last 4 digits of account number	1539	\$3,090.10
	c/o Becket and Lee LLP PO Box 3001	When was the debt incurred?	9/2014	
	Malvern, PA 19355 Number Street City State Zlp Code	As of the date you file, the claim	Charle all that apply	
	Who incurred the debt? Check one.	в. Спеск ан тат арргу		
	Debtor 1 only	Пол		
	Debtor 2 only	☐ Contingent		
	<u> </u>	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecure	d alaim.	
	At least one of the debtors and another	Student loans	d Claim.	
	☐ Check if this claim is for a community debt			r. i.
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you	a did not
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes			
	Li res	Other. Specify Open acco	unt	
4.3	American Express Centurion Bank Nonpriority Creditor's Name	Last 4 digits of account number	1539	\$26,303.00
	c/o Becket and Lee LLP PO Box 3001	When was the debt incurred?	10/2012	
	Malvern, PA 19355			
	Number Street City State ZIp Code	As of the date you file, the claim	is: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you	u did not
		report as priority claims Debts to pension or profit-sharir	a plane, and other similar dabt-	
	■ No		- ·	
	Yes	Other. Specify Closed Acc	count	

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Debtoi Debtoi	· 1 John Allen Toms · 2 Paige Bryant Toms		Case number (if know)	16-61148			
			, ,				
4.4	American Express Centurion Bank Nonpriority Creditor's Name	Last 4 digits of account number	1539	_	\$1,250.61		
	c/o Becket and Lee LLP PO Box 3001	When was the debt incurred?	6/2013				
	Malvern, PA 19355 Number Street City State Zlp Code	As of the date you file the claim	Chapte all that apply				
	Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce t	hat you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar deb	ots			
	Yes	Other. Specify Open acco	unt				
4.5	American Express Centurion Bank	Last 4 digits of account number	1539		\$1,442.50		
	Nonpriority Creditor's Name c/o Becket and Lee LLP PO Box 3001	When was the debt incurred?	7/2013				
	Malvern, PA 19355 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
	☐ Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	■ Debtor 1 and Debtor 2 only	☐ Disputed					
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	\square Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims					
	No	Debts to pension or profit-sharing	g plans, and other similar deb	ots			
	Yes	Other. Specify Open acco	unt				
4.6	American Financial Man Nonpriority Creditor's Name	Last 4 digits of account number	9909	_	\$1,333.00		
	3715 Ventura Dr Arlington Heig, IL 60004	When was the debt incurred?	Opened 3/01/12				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
	Debtor 1 only	☐ Contingent					
	☐ Debtor 2 only	☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only	☐ Disputed					
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
	☐ Check if this claim is for a community	☐ Student loans					
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce t	hat you did not			
	■ No	\square Debts to pension or profit-sharing	☐ Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Collection	Attorney Genuine Par	ts Co/Napa			

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Debtor 1 Debtor 2	John Allen Toms Paige Bryant Toms		Case number (if know) 16-61148			
4.7	Bank Of America	Last 4 digits of account number	7485	\$20,645.00		
	Nonpriority Creditor's Name Nc4-105-03-14 Po Box 26012	When was the debt incurred?	Opened 5/01/95 Last Active 12/12/11	Ψ20,043.00		
	Greensboro, NC 27410 Number Street City State Zlp Code	As of the date you file, the claim i	s: Check all that apply			
	Who incurred the debt? Check one.	_				
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
	ls the claim subject to offset?	report as priority claims				
	No	☐ Debts to pension or profit-sharin				
	Yes	Other. Specify Credit Card	<u> </u>			
	Bank Of America Nonpriority Creditor's Name	Last 4 digits of account number	2891	\$3,584.00		
	Not-105-03-14 Po Box 26012	When was the debt incurred?	Opened 4/01/95 Last Active 12/06/11			
	Greensboro, NC 27410	A contract of the state of the				
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharin				
	□ Yes	■ Other. Specify Credit Card				
	Chase Nonpriority Creditor's Name	Last 4 digits of account number	3162	\$25,040.00		
	Attn: Correspondence Dept Po Box 15298	When was the debt incurred?	Opened 10/01/95 Last Active 1/05/12			
_	Wilmington, DE 19850					
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing plans, and other similar debts				
	Yes	Other. Specify Credit Card	<u> </u>			

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Debte Debte	or 1 John Allen Toms or 2 Paige Bryant Toms		Case number (if know) 16-61148	
4.1 0	Comenity Bank/Lane Bryant	Last 4 digits of account number	6877	Unknown
	Nonpriority Creditor's Name Po Box 182125 Columbus, OH 43218	When was the debt incurred?		
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt	Student loans		
	Is the claim subject to offset?	 Obligations arising out of a separe report as priority claims 	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.1 1	Credit Control Corp	Last 4 digits of account number	0959	\$142.00
	Nonpriority Creditor's Name Po Box 120568	When was the debt incurred?	Opened 1/01/14	
	Newport News, VA 23612 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	□ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	<u></u>	☐ Student loans		
	☐ Check if this claim is for a community debt Is the claim subject to offset?	Obligations arising out of a sepa	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes		Attornev Charlottesville	
4.1	Fisher Auto Parts, Inc. Nonpriority Creditor's Name	Last 4 digits of account number	1539	\$54,111.00
	P.O. Box 2248	When was the debt incurred?	4/2012	
	Staunton, VA 24401 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	■ No □ Yes		= 1	
	□ res	■ Other. Specify Closed Acc		

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Debtor Debtor	1 John Allen Toms 2 Paige Bryant Toms		Case number (if know) 16-61148			
4.1 3	Fredericksburg Credit Bureau	Last 4 digits of account number	1539	\$1,129.00		
	Nonpriority Creditor's Name 10506 Wakeman Drive Fredericksburg, VA 22407	When was the debt incurred?	9/2015			
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	☐ Debts to pension or profit-sharin	g plans, and other similar debts			
	☐ Yes	Other. Specify Open acco				
4.1	For desireboth on One did Donner.		4520	****		
4	Fredericksburg Credit Bureau Nonpriority Creditor's Name	Last 4 digits of account number	1539	\$336.00		
	10506 Wakeman Drive Fredericksburg, VA 22407	When was the debt incurred?	6/2013			
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	\square Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Open acco	unt			
4.1	Glasser and Glasser, P.L.C.	Last 4 digits of account number	1539	\$500.00		
	Nonpriority Creditor's Name 580 E. Main Street	When was the debt incurred?	6/2014			
	Suite 600 Norfolk, VA 23510					
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	☐ Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another					
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Open acco	unt			
						

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Debtor Debtor	1 John Allen Toms 2 Paige Bryant Toms		Case number (if know) 16-61148	
4.1 6	J.L. Walston & Associates	Last 4 digits of account number	1539	\$500.00
	Nonpriority Creditor's Name 326 South Main St Emporia, VA 23847	When was the debt incurred?	6/2013	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Open acco	unt	
4.1	Karen C. Taylor c/o	Last 4 digits of account number	1539	\$20,000.00
	Nonpriority Creditor's Name Kelly G. Roberts, Esq. Tucker Griffin Barnes 307 W Rio Rd	When was the debt incurred?	7/2015	
	Charlottesville, VA 22901 Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt	☐ Student loans		
	Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Open acco	unt	
4.1 8	Martha Jefferson Medical Group Nonpriority Creditor's Name	Last 4 digits of account number	1539	\$500.00
	PO Box 1583 Charlottesville, VA 22902-1583	When was the debt incurred?	8/2014	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	Debtor 1 and Debtor 2 only	Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	a plane, and other circles delta	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Open acco	unt	

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Debtor Debtor	1 John Allen Toms 2 Paige Bryant Toms		Case number (if know) 16-61148	
4.1 9	Midland Funding	Last 4 digits of account number	1539	\$500.00
9	Nonpriority Creditor's Name 8875 Aero Dr Ste 200	When was the debt incurred?	7/2012	<u> </u>
	San Diego, CA 92123 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Open acco	unt	
4.2	North Charlottesville Self Storage	Last 4 digits of account number	1539	\$550.00
	Nonpriority Creditor's Name 3466 Seminole Trail Charlottesville, VA 22911	When was the debt incurred?	6/2015	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	\square Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Open acco	unt	
4.2 1	Sentara Martha Jefferson Hospital Nonpriority Creditor's Name	Last 4 digits of account number	1539	\$3,518.32
	P.O. Box 759132 Baltimore, MD 21275-9132	When was the debt incurred?	8/2015	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Open acco	unt	

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Debte Debte	or 1 John Allen Toms or 2 Paige Bryant Toms		Case number (if know) 16-61148	
4.2	UVA Health System	Last 4 digits of account number	1539	\$520.34
	Nonpriority Creditor's Name PO Box 530272 Patient Financial Services Atlanta, GA 30353	When was the debt incurred?	7/2015	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim: I claim: I claim:	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing		
	■ No □ Yes	Other. Specify Open acco	,	
4.2	UVA Physicians Group	Last 4 digits of account number	1539	\$293.62
	Nonpriority Creditor's Name PO BOX 9007 Charlottesville, VA 22906-9007	When was the debt incurred?	3/2014	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Open acco		
4.2	Zwicker & Associates, P.C.	Last 4 digits of account number	1539	\$500.00
	Nonpriority Creditor's Name 948 Clopper Road, 2nd Floor Gaithersburg, MD 20878	When was the debt incurred?	6/2013	
	Number Street City State Zlp Code	As of the date you file, the claim	s: Check all that apply	
	Who incurred the debt? Check one.	_		
	Debtor 1 only	Contingent		
	Debtor 2 only	Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	At least one of the debtors and another	Type of NONPRIORITY unsecure	a ciaim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	■ Other. Specify Open acco		

Part 3: List Others to Be Notified About a Debt That You Already Listed

^{5.} Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

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Debtor 1 John Allen Toms Debtor 2 Paige Bryant Toms		Case number (if know)	16-61148		
Name and Address Charlottesville Radiology Ltd. PO Box 2545 Virginia Beach, VA 23450-2545	On which entry in Part 1 or Part 2 Line 4.11 of (Check one): Last 4 digits of account number	did you list the original creditor? Part 1: Creditors with Prior Part 2: Creditors with None	•		
Name and Address Genuine Parts Co/Napa 2999 Circle 75 Pkwy Atlanta, GA 30339	On which entry in Part 1 or Part 2 Line 4.6 of (Check one): Last 4 digits of account number	t 2 did you list the original creditor? Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims			
Name and Address Internal Revenue Service Insolvency Unit 400 N 8th St Ste 76 Richmond, VA 23219-4836	On which entry in Part 1 or Part 2 Line 2.2 of (Check one): Last 4 digits of account number	☐ Part 2: Creditors with Nonpriority Unsecured Claims			

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 1,804.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 1,804.00
				Total Claim
	6f.	Student loans	6f.	\$ 0.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 166,640.30
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 166,640.30

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Fill in this infor	mation to identify your	case:			
Debtor 1	John Allen Toms				
	First Name	Middle Name	Last Name		
Debtor 2	Paige Bryant Ton	ns			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the:		WESTERN DISTRICT (OF VIRGINIA		
Case number	16-61148				
(if known)				☐ Check if t amended	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

State what the contract or lease is for

2.1 North Charlottesville Self Storage 3466 Seminole Trail Charlottesville, VA 22911 **Storage Unit Lease**

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Fill in this	information to identify yo	III case.			
Debtor 1	John Allen Tor First Name	Middle Name	Last Name		
Debtor 2	Paige Bryant T	oms			
(Spouse if, filin		Middle Name	Last Name		
United Sta	tes Bankruptcy Court for the	e: WESTERN DISTRICT	OF VIRGINIA		
Case num	ber 16-61148				
(if known)				☐ Check if this is a amended filing	an
Officia	l Form 106H				
	lule H: Your Co	dehtors			12/15
Jeneu	idie II. Todi Co	uebioi 5			12/13
our name	nd number the entries in to and case number (if know you have any codebtors?	vn). Answer every questic	on.	o this page. On the top of any Additional Pages as a codebtor.	, write
50	you have any coucles.	(ii you are iiiiig a joint oacc	, ao not not ounor opoaco	ac a codebici.	
■ No □ Yes	3				
	hin the last 8 years, have y a, California, Idaho, Louisia			y? (Community property states and territories incluington, and Wisconsin.)	de
	Go to line 3.				
⊔ Yes	s. Did your spouse, former s	pouse, or legal equivalent li	ve with you at the time?		
in line Form out Co	2 again as a codebtor on	ly if that person is a guara	intor or cosigner. Make	if your spouse is filing with you. List the person sure you have listed the creditor on Schedule D6G). Use Schedule D, Schedule E/F, or Schedule Column 2: The creditor to whom you owe the	(Official e G to fill
I	Name, Number, Street, City, State an	d ZIP Code		Check all schedules that apply:	
3.1				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
-	Number Street			_	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	
	City	State	ZIP Code		

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C#II-	in this information to identify your c	200				ı				
	otor 1 John Allen									
					_					
	otor 2 Paige Bryan	t Toms			_					
Uni	ted States Bankruptcy Court for the	: WESTERN DISTRICT	OF VIRGINIA		_					
l	se number 16-61148					Chec	k if this is	:		
(If kr	nown)		•			□ A	n amende	ed filing		
_						=			g postpetition ollowing date:	chapter
<u>O</u>	fficial Form 106l					M	M / DD/ \	/YYY		
S	chedule I: Your Inc	ome								12/15
Par	use. If you are separated and you ch a separate sheet to this form. t 1: Describe Employment									
1.	Fill in your employment information.		Debtor 1				Debtor 2	2 or non-fi	ling spouse	
	If you have more than one job,	Employment status	■ Employed				☐ Empl	oyed		
	attach a separate page with information about additional	Employment status	☐ Not employed				■ Not employed			
	employers.	Occupation	Self-Employed				Disable	ed		
	Include part-time, seasonal, or self-employed work.	Employer's name								
	Occupation may include student or homemaker, if it applies.	Employer's address								
		How long employed the	here? 4 Years	s, 6 Mor	ths		_			
Par	t 2: Give Details About Mor	nthly Income								
spou If yo	mate monthly income as of the duse unless you are separated. u or your non-filing spouse have more space, attach a separate sheet to	ate you file this form. If you	, g			•		·	·	J
						For Deb	otor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sala deductions). If not paid monthly,			2.	\$		0.00	\$	0.00	
3.	Estimate and list monthly overt	ime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add lin	ne 2 + line 3.		4.	\$		0.00	\$	0.00	

John Allen Toms Debtor 1 16-61148 Debtor 2 **Paige Bryant Toms** Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here \$ 0.00 0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 0.00 0.00 Mandatory contributions for retirement plans 5b. \$ 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 0.00 0.00 5f. Domestic support obligations 5f. 0.00 0.00 5g. Union dues 5g. \$ 0.00 0.00 Other deductions. Specify: 5h.+ 5h. \$ 0.00 \$ 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 0.00 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 0.00 \$ 0.00 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. \$ 0.00 8a 1,181.36 8h. Interest and dividends 8b. 0.00 \$ 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 8e. 8e. 0.00 1,707.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. \$ 0.00 \$ 0.00 Specify: 8g. Pension or retirement income \$ 8g. \$ 0.00 0.00 Other monthly income. Specify: 8h. 8h.+ \$ \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 1,707.00 1,181.36 10. Calculate monthly income. Add line 7 + line 9. 10. \$ + \$ 1,181.36 1,707.00 \$ 2,888.36 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: Contribution from Debtor's Parents 11. 1,600.00 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it

applies

4,488.36 12. \$ Combined

monthly income

3.	Do you ex	spect an increase	or decrease within the	vear after	you file this form?

ľ	NO.	
		_

П Yes. Explain: Case 16-61148 Doc 13 Filed 06/20/16 Entered 06/20/16 12:43:08 Desc Main Document Page 33 of 46

Fill	in this information to identify your case:				
Deb	otor 1 John Allen Toms		Check	if this is:	
	otor 2 Paige Bryant Toms ouse, if filing)	_ A		ving postpetition chapter the following date:	
	ted States Bankruptcy Court for the: WESTERN DISTRICT OF VIR	rGINIA		MM / DD / YYYY	
				, 55, 1111	
1	nown) 16-61148				
	fficial Form 106J				
	chedule J: Your Expenses	CP (d)	-41		12/15
info	as complete and accurate as possible. If two married people ormation. If more space is needed, attach another sheet to the mber (if known). Answer every question.	e are filing together, bo his form. On the top of	oth are equal any additior	nal pages, write y	or supplying correct your name and case
Par 1.	t 1: Describe Your Household Is this a joint case?				
••	□ No. Go to line 2.				
	Yes. Does Debtor 2 live in a separate household?				
	■ No □ Yes. Debtor 2 must file Official Form 106J-2, <i>Expen</i>	nses for Separate House	ehold of Debto	or 2.	
2.	Do you have dependents? ■ No				
	Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent			Dependent's age	Does dependent live with you?
	Do not state the				□ No
	dependents names.				☐ Yes
					□ No □ Yes
					□ No
					□Yes
					□ No
2	De veus evenence include				☐ Yes
3.	Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				
	t 2: Estimate Your Ongoing Monthly Expenses				
exp	timate your expenses as of your bankruptcy filing date unles benses as of a date after the bankruptcy is filed. If this is a so blicable date.				
	lude expenses paid for with non-cash government assistant				
	value of such assistance and have included it on <i>Schedule</i> ficial Form 106I.)	i: Your income		Your expo	enses
4.	The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	e. Include first mortgage	e 4. \$		2,083.00
	If not included in line 4:				
	4a. Real estate taxes		4a. \$		0.00
	4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
	4c. Home maintenance, repair, and upkeep expenses		4c. \$		50.00
5.	 4d. Homeowner's association or condominium dues Additional mortgage payments for your residence, such as 	s home equity loans	4d. \$ 5. \$		0.00
			σ. ψ		5.00

Paige Bryant Toms	Case num	ber (if known)	16-61148
Utilities:			
6a. Electricity, heat, natural gas	6a.	\$	260.00
6b. Water, sewer, garbage collection	6b.	\$	42.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c.	\$	0.00
6d. Other. Specify: Cell Phone	6d.	\$	140.00
Cable		\$	114.00
Internet		\$	49.00
Food and housekeeping supplies		\$	500.00
Childcare and children's education costs	8.	\$	0.00
Clothing, laundry, and dry cleaning	9.	\$	25.00
Personal care products and services	10.	\$	100.00
Medical and dental expenses	11.	\$	50.00
Transportation. Include gas, maintenance, bus or train fare.		<u> </u>	30.00
Do not include car payments.	12.	\$	200.00
Entertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	25.00
Charitable contributions and religious donations	14.	\$	0.00
Insurance.		-	2.00
Do not include insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insurance	15a.	\$	244.00
15b. Health insurance	15b.	\$	0.00
15c. Vehicle insurance	15c.	\$	330.00
15d. Other insurance. Specify:	15d.	\$	0.00
Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.		· —	
Specify: Personal Property Taxes	16.	\$	40.00
Installment or lease payments:	4-	•	
17a. Car payments for Vehicle 1	17a.		0.00
17b. Car payments for Vehicle 2	17b.	·	0.00
17c. Other. Specify:	17c.	\$	0.00
17d. Other. Specify:	17d.	\$	0.00
Your payments of alimony, maintenance, and support that you did not report as		¢	0.00
deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).	10.	\$	
Other payments you make to support others who do not live with you.	40	Ф	0.00
Specify:	19.		
Other real property expenses not included in lines 4 or 5 of this form or on Sch			0.00
20a. Mortgages on other property 20b. Real estate taxes	20a. 20b.		0.00
		·	0.00
20c. Property, homeowner's, or renter's insurance	20c.		0.00
20d. Maintenance, repair, and upkeep expenses	20d.		0.00
20e. Homeowner's association or condominium dues	20e.	·	0.00
Other: Specify: Pet Care/Food	21.	+\$	100.00
Calculate your monthly expenses			
22a. Add lines 4 through 21.		\$	4,352.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line 22a and 22b. The result is your monthly expenses.		\$	4,352.00
Calculate your monthly net income.			.,
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	4,488.36
23b. Copy your monthly expenses from line 22c above.	23b.		4,466.36
200. Copy your monthly expenses nom line 220 above.	۷۵۵.	-ψ	4,352.00
23c. Subtract your monthly expenses from your monthly income.	23c.	•	136.36
The result is your <i>monthly net income</i> .		۱.۳	130.36

☐ Yes.

Explain here: NOTE: Debtor's 21 year old daughter lives with them, daughter does not contribute to any of the household expenses.

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Fill in this info	ormation to identify your	case:			
Debtor 1	John Allen Toms First Name	Middle Name	Last Name		
Debtor 2	Paige Bryant Tom	s			
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	WESTERN DISTRICT	OF VIRGINIA		
Case number (if known)	16-61148				☐ Check if this is an amended filing
Official Fo	rm 106Dec				
Declara	ation About a	n Individua	I Debtor's Sch	edules	12/15
obtaining mor years, or both		connection with a ban	s or amended schedules. Ma kruptcy case can result in fi		
Did you	pay or agree to pay some	one who is NOT an atto	rney to help you fill out bank	ruptcy forms?	
■ No					
☐ Yes	. Name of person				Petition Preparer's Notice, ignature (Official Form 119)
	nalty of perjury, I declare t are true and correct.	that I have read the sur	nmary and schedules filed w	ith this declaration and	
X /s/ Jo	ohn Allen Toms		X /s/ Paige Brya	ant Toms	
Johr	n Allen Toms		Paige Bryant	Toms	

Signature of Debtor 2

Date **June 20, 2016**

Signature of Debtor 1

Date June 20, 2016

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Fill i	n this inf	ormation to identify you	case:							
Debt	or 1	John Allen Toms	6							
Dala	0			iddle Name	La	ast Name				
Debt (Spous	or 2 se if, filing)	Paige Bryant To		iddle Name	La	ast Name				
Unite	ed States	Bankruptcy Court for the:	WEST	ERN DISTRICT O	F VIRGIN	IA				
Case	number	The first space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case own). Answer every question. WESTERN DISTRICT OF VIRGINIA Check if this is an amended filing Check if this is an amended filing 4/16 The first space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case own). Answer every question. The first space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case own). Answer every question. The first space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case own). Answer every question.								
(if kno	wn)							□ C	heck if this is an	
								ar	mended filing	
~ · · ·		407								
		_								
Sta	temei	nt of Financial	Attairs	s for Individ	duals	Filing for B	ankruptcy		4/	16
inforr	nation. I per (if kno	f more space is needed, own). Answer every ques	attach a s stion.	separate sheet to	this form	i. On the top of any				
				<u> unu 1111010 101</u>	21104 2	0.0.0				_
	_									
	■ Marri □ Not r									
-										
2. I	During th	e last 3 years, have you	lived any	where other than	where yo	ou live now?				
ı	No									
I	☐ Yes.	List all of the places you li	ved in the	last 3 years. Do n	ot include	where you live now	<i>1</i> .			
	Debtor 1	Prior Address:				Debtor 2 Prior Ad	dress:			
										ty
ı	No									
I	☐ Yes.	Make sure you fill out Sch	edule H:	Your Codebtors (O	fficial For	m 106H).				
Part	2 Exp	olain the Sources of You	r Income							
F	Fill in the t	otal amount of income yo	u received	I from all jobs and	all busine	sses, including part-	time activities.	/ious calen	ndar years?	
ı	□ No									
ı	_	Fill in the details.								
			Debtor 1				Debtor 2			
			Sources	of income	(befor	e deductions and	Sources of inco		(before deductions	
		/ 1 of current year until	☐ Wage	es, commissions,	2	\$6,116.73	☐ Wages, comn	nissions,	\$0.00)
	•			ating a business			☐ Operating a b	usiness		
			- Opera	aung a business				40111000		

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Debtor 1				Cas	se number (if known)	16-61148	
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inco		Gross income (before deductions and exclusions)
	calendar year: y 1 to December 3	31, 2015)	☐ Wages, commissions, bonuses, tips	\$10,357.00	☐ Wages, community Wages, tips	missions,	\$0.00
			Operating a business		☐ Operating a b	ousiness	
	calendar year bef y 1 to December 3		☐ Wages, commissions, bonuses, tips	\$8,000.00	☐ Wages, commonstant was bonuses, tips	missions,	\$0.00
			Operating a business		☐ Operating a b	ousiness	
List ∈	each source and the No Yes. Fill in the de	S .	me from each source separa Debtor 1 Sources of income	Gross income from	Debtor 2 Sources of inco	ome	Gross income
			Describe below.	each source (before deductions and exclusions)	Describe below.		(before deductions and exclusions)
	nuary 1 of currer you filed for ban			\$0.00	SSDI		\$11,339.40
				\$0.00	SSDI		\$22,306.80
	calendar year: y 1 to December 3	31, 2015)		\$0.00	SSDI		\$22,679.00
Part 3:	List Cortain Par	umante Vall	Made Before You Filed for	Rankruntov			
	either Debtor 1's No. Neither De	or Debtor 2	s debts primarily consume ebtor 2 has primarily consi personal, family, or househo	r debts? umer debts. Consumer deb	ts are defined in 11	U.S.C. § 101	I(8) as "incurred by an
	During the ☐ No.	90 days befo Go to line 7	re you filed for bankruptcy, d	id you pay any creditor a tota	al of \$6,425* or mor	e?	
	☐ Yes	paid that cre	each creditor to whom you pa editor. Do not include paymen payments to an attorney for t	nts for domestic support obli			
_	* Subject t		on 4/01/19 and every 3 year		n or after the date of	adjustment.	
•			r both have primarily consure you filed for bankruptcy, d		al of \$600 or more?		
	■ No.	Go to line 7					
	□ _{Yes}	include pay	each creditor to whom you pa ments for domestic support o this bankruptcy case.				
Cre	editor's Name and	l Address	Dates of payme	ent Total amount	Amount you still owe	Was this p	payment for

Case 16-61148 Doc 13 Filed 06/20/16 Entered 06/20/16 12:43:08 Desc Main Document Page 38 of 46 Debtor 1 John Allen Toms 16-61148 Debtor 2 **Paige Bryant Toms** Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Amount you **Insider's Name and Address** Dates of payment **Total amount** Reason for this payment still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Reason for this payment Dates of payment Total amount Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Karen C. Taylor c/o Kelly G. **Warrant In Debt Albemarle County GDC** Pending Roberts, Esq. v. John Allen Toms 501 E. Jefferson St □ On appeal GV16000083-00 Charlottesville, VA 22901 □ Concluded 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address** Value of the **Describe the Property** Date property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?

No

☐ Yes

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	otor 2 Paige Bryant Toms			Case number (if known)	16-61148	
Par	t 5: List Certain Gifts and Contributions					
13.	Within 2 years before you filed for bankrup No Yes. Fill in the details for each gift.	otcy, o	did you give any gifts with a total va	lue of more than \$60	0 per person	?
	Gifts with a total value of more than \$600 per person		Describe the gifts	Date: the g	s you gave ifts	Value
	Person to Whom You Gave the Gift and Address:					
14.	Within 2 years before you filed for bankrup No			ns with a total value	of more than	\$600 to any charity?
	Yes. Fill in the details for each gift or con	ntribut	ion.			
	Gifts or contributions to charities that tot more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code)	al	Describe what you contributed		s you ibuted	Value
Par						
	Within 1 year before you filed for bankrupt or gambling? No Yes. Fill in the details.	cy or	since you filed for bankruptcy, did y	you lose anything be	ecause of thef	t, fire, other disaster,
				D-(-	- 6	Malara of managements
	how the loss occurred	nclude	ibe any insurance coverage for the lease the amount that insurance has paid. In the claims on line 33 of Schedule A/B:	_ist pending loss	of your	Value of property lost
Par	t 7: List Certain Payments or Transfers					
16.	Within 1 year before you filed for bankrupt consulted about seeking bankruptcy or pre- Include any attorneys, bankruptcy petition pre-	epari	ng a bankruptcy petition?			rty to anyone you
	□ No■ Yes. Fill in the details.					
	Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You	u	Description and value of any prop transferred		payment Insfer was	Amount of payment
	Miller Law Group, P.C. 1160 Pepsi Place Suite 341		\$500.00 Paid See Exh. A to Fo	rm 2016 6/7/2	016	\$500.00
	Charlottesville, VA 22901					
17.	Within 1 year before you filed for bankrupt promised to help you deal with your credit Do not include any payment or transfer that you	ors o	r to make payments to your creditor		fer any prope	rty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address		Description and value of any prop transferred		payment insfer was	Amount of payment

Case 16-61148 Doc 13 Filed 06/20/16 Entered 06/20/16 12:43:08 Desc Main Document Page 40 of 46 Debtor 1 John Allen Toms 16-61148 Debtor 2 **Paige Bryant Toms** Case number (if known) 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. ☐ No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Describe any property or Date transfer was **Address** property transferred payments received or debts made paid in exchange Person's relationship to you Salvage Company 2003 Cadillac Escalade Sold to Junk for \$250.00, 6/2015 Farmville, VA Value: \$250.00 Used proceeds to pay household expenses Unrelated **Unrelated Third Party** 1992 Nissan Pick-up **Sold for \$500.00, Used** 6/1/2016 Value: \$500.00 proceeds to pay household expenses Unrelated 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. ☐ No Yes. Fill in the details. Name of Financial Institution and Last 4 digits of Type of account or Date account was Last balance closed, sold, Address (Number, Street, City, State and ZIP account number instrument before closing or Code) moved, or transfer transferred **University of Virginia CCU** XXXX-9420 1/2016 \$0.00 Checking 3300 Berkmar Drive □ Savings Charlottesville, VA 22901 ■ Money Market □ Brokerage □ Other 1/2016 \$0.00 University of Virginia CCU XXXX-9420 ☐ Checking 3300 Berkmar Drive Savings Charlottesville, VA 22901 ☐ Money Market □ Brokerage □ Other University of Virginia CCU XXXX-9420 1/2016 \$0.00 ☐ Checking 3300 Berkmar Drive

□ Savings

Club

■ Money Market ☐ Brokerage

Other Christmas

Charlottesville, VA 22901

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Deb	tor 2 Paige Bryant Toms		Case number (if known) 16-61148	
21.	Do you now have, or did you have within 1 year cash, or other valuables?	before you filed for bankruptcy, ar	ny safe deposit box or other deposito	ory for securities,
	■ No			
	Yes. Fill in the details.			
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
22.	Have you stored property in a storage unit or pla	ace other than your home within 1	year before you filed for bankruptcy	?
	□ No			
	Yes. Fill in the details.			
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?
	North Charlottesville Self Storage 3466 Seminole Trail Charlottesville, VA 22911	John Allen Toms, 3568 Pritchett Lane, Charlottesville, VA 22911	Business Papers and Tools	□ No ■ Yes
	■ No □ Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP	Describe the property	Value
	Address (Number, Street, City, State and ZIP Code)	Code)		
Par	10: Give Details About Environmental Informa	ation		
For	he purpose of Part 10, the following definitions	apply:		
	Environmental law means any federal, state, or toxic substances, wastes, or material into the ai regulations controlling the cleanup of these sub	r, land, soil, surface water, ground	• • • • • • • • • • • • • • • • • • • •	
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal		aw, whether you now own, operate,	or utilize it or used
	Hazardous material means anything an environi hazardous material, pollutant, contaminant, or s	mental law defines as a hazardous	waste, hazardous substance, toxic s	substance,
Rep	ort all notices, releases, and proceedings that yo	ou know about, regardless of when	they occurred.	
24.	Has any governmental unit notified you that you	ı may be liable or potentially liable	under or in violation of an environme	ental law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of any	release of hazardous material?		
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice

John Allen Toms

Debtor 1

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☐ Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

■ No

■ No

Debtor 1

Debtor 2

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	John Allen To Paige Bryant		Case number (if known)	16-61148
☐ Yes. Na	ime of Person	Attach the Bankruptcy Petition Preparer's Notice, Declara	ation, and Signature (Offici	al Form 119).

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Fill in this information to identify your case:								
Debtor 1	John Allen Toms							
Debtor 2 (Spouse, if filing)	Paige Bryant Toms							
United States E	Sankruptcy Court for the: Western District of Virginia							
Case number (if known)	16-61148							

Check	Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:										
 1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3). 										
	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).									
3. The commitment period is 3 years.										
	4. The commitment period is 5 years.									

☐ Check if this is an amended filing

Official Form 122C-1

Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

Part 1: Calculate Your Average Monthly Income

- 1. What is your marital and filing status? Check one only.
 - □ Not married. Fill out Column A, lines 2-11.
 - Married. Fill out both Columns A and B, lines 2-11.

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

						Colum Debto		Column Debtor non-fili	
Your gross wages, salary, tips, bonuses, over payroll deductions).	rtime,	and co	mmis	sions (b	efore all	\$	0.00	\$	0.00
 Alimony and maintenance payments. Do not in Column B is filled in. 	nclude	e payme	nts fro	m a spo	use if	\$	0.00	\$	0.00
All amounts from any source which are regul of you or your dependents, including child su from an unmarried partner, members of your hou and roommates. Include regular contributions fro filled in. Do not include payments you listed on lin	ipportuseholom a s	t. Includ d, your	e regu depen	lar contr dents, pa	ibutions arents, B is not	\$	0.00	\$	0.00
 Net income from operating a business, profession, or farm 		Debtor	1						
Gross receipts (before all deductions)	\$		1,	182.00					
Ordinary and necessary operating expenses	-\$			0.00					
Net monthly income from a business, profession, or farm	\$		1,	182.00	Copy here -> \$	\$	1,182.00	\$	0.00
. Net income from rental and other real propert	y	Debtor	1						
Gross receipts (before all deductions)		\$_	0.0						
Ordinary and necessary operating expenses		-\$	0.0						
Net monthly income from rental or other real prop	oertv	\$	0.0	Cop	/ here -> :	\$	0.00	\$	0.00

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Debtor 1 Debtor 2	John Allen Toms Paige Bryant Toms			Case numb	er (<i>if known</i>)	16-61148	3
				Column A Debtor 1		Column B Debtor 2 o	or
7 Int	terest, dividends, and royalties			\$	0.00	\$	0.00
	nemployment compensation			\$	0.00	\$	0.00
		nd that the amount received was a be	enefit under	· —	0.00	<u> </u>	0.00
	e Social Security Act. Instead, list it	here:	criciit dridei				
	For you		0.00				
	For your spouse	\$	0.00				
	ension or retirement income. Do not nefit under the Social Security Act.	not include any amount received that	t was a	\$	0.00	\$	0.00
	•	listed above. Specify the source and	d amount	Ψ		<u> </u>	
Do red do	o not include any benefits received ceived as a victim of a war crime, a	under the Social Security Act or pay crime against humanity, or internation other sources on a separate page an	ments onal or				
	Contribution from Pare	nts		\$1	,600.00	\$	0.00
				\$	0.00	\$	0.00
	Total amounts from separate	pages, if any.	+	\$	0.00	\$	0.00
	alculate your total average month ch column. Then add the total for C	ly income. Add lines 2 through 10 foolumn A to the total for Column B.	or \$	2,782.00	+	0.00	= \$2,782.00
	_						Total average monthly income
Part 2:	Determine How to Measure	our Deductions from Income					
12. C c	opy your total average monthly in	come from line 11.					\$\$
	You are not married. Fill in 0 bel	ow.					
	You are married and your spous	e is filing with you. Fill in 0 below.					
	, ,	,					
	dependents, such as payment o	listed in line 11, Column B, that was f the spouse's tax liability or the spou	ıse's suppo	rt of someor	ne other th	an you or yo	ur dependents.
	Below, specify the basis for excl adjustments on a separate page	uding this income and the amount of	fincome de	voted to eac	h purpose	. If necessary	y, list additional
	If this adjustment does not apply	, enter 0 below.	•				
			\$		_		
	-		—				
			• •				
	Total		\$	0.0	00 Co	py here=>	0.00
14. Y	our current monthly income. Su	btract line 13 from line 12.					\$\$
15. C	Calculate your current monthly in	come for the year. Follow these ste	eps:				
1	5a. Copy line 14 here=>						\$2,782.00
	Multiply line 15a by 12 (the nu						x 12
1							ı

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Debtor 2		aige Bryant Toms		Case number (if known)	16-61148
16. C	alcul	ate the median family income that applies to	you. Follow these	steps:	
10	6a. F	ill in the state in which you live.	VA		
16	6h Fi	ill in the number of people in your household.	3		
		ill in the median family income for your state and			¢ 79,956.00
• •	Т	o find a list of applicable median income amount	ts, go online using t	the link specified in the separate	φ
17 H		structions for this form. This list may also be availe the lines compare?	ilable at the bankri	uptcy clerk's office.	
	7a.	■ Line 15b is less than or equal to line 16c. 11 U.S.C. § 1325(b)(3). Go to Part 3. Do			
17	7b.	Line 15b is more than line 16c. On the top 1325(b)(3). Go to Part 3 and fill out Calc your current monthly income from line 14	of page 1 of this fo culation of Your Di	orm, check box 2, Disposable incon	ne is determined under 11 U.S.C. §
Part 3:		Calculate Your Commitment Period Under 11	U.S.C. § 1325(b)((4)	
18. C	ору у	your total average monthly income from line	 11 .		\$ 2,782.00
C	onten	et the marital adjustment if it applies. If you are did that calculating the commitment period under b's income, copy the amount from line 13.	e married, your spo 11 U.S.C. § 1325(b	ouse is not filing with you, and you o)(4) allows you to deduct part of yo	ur
		the marital adjustment does not apply, fill in 0 or	ı line 19a.		-\$0.00
19	9b. S	ubtract line 19a from line 18.			\$2,782.00
20. C	alcul	ate your current monthly income for the year	Follow these step	ps:	
20	0a. C	opy line 19b			\$\$
	M	fultiply by 12 (the number of months in a year).			x 12
20	0b. T	he result is your current monthly income for the y	year for this part of	the form	\$33,384.00
20	0c. C	copy the median family income for your state and	l size of household	from line 16c	\$\$\$
2	1. H	ow do the lines compare?			
		Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by the	court, on the top of page 1 of this fo	orm, check box 3, The commitment
		Line 20b is more than or equal to line 20c. U commitment period is 5 years. Go to Part 4.	nless otherwise ord	dered by the court, on the top of page	ge 1 of this form, check box 4, The
Part 4:		Sign Below			
В	y sigr	ning here, under penalty of perjury I declare that	the information on	this statement and in any attachme	ents is true and correct.
_		ohn Allen Toms		X /s/ Paige Bryant Toms	
		n Allen Toms ature of Debtor 1		Paige Bryant Toms Signature of Debtor 2	
	ate _	June 20, 2016		Date June 20, 2016	
		MM / DD / YYYY		MM / DD / YYYY	
	•	checked 17a, do NOT fill out or file Form 122C-2 checked 17b, fill out Form 122C-2 and file it with		20 - 6 4 h - 4 6	and his to a superference that a first

John Allen Toms